## Arizona Army National Guard Occupational Health Exam Request Form

The purpose of this form is to schedule occupational health exams for Federal Technician employees. Complete and return this form with a copy of your position description to the Occupational Health Office. Scan and Email to <a href="mailto-jayson.lutes@us.army.mil">jayson.lutes@us.army.mil</a> or mail to Arizona Army National Guard, attn: Occupational Health Nurse, 5636 E. McDowell Rd, Phoenix, AZ 85008. The information will be entered into the Federal Occupational Health Module and you will be contacted to schedule a physical exam. For questions, please call or Email MAJ Jayson Lutes, AN, at (602) 629-4245.

## Page #1 Exam Request Information (This information is used to look you up in the Federal Occupational Health online system)

(1111511	normation is used to look yo	ou up in the rederar	Occupational Hear	th omine system)
Worker's name:				
Full Social Security Numb	er:	Gender (circl	e one): Male Fer	<u>nale</u>
Exam Type (circle one):	L	eave blank		
Date of Request:				
(This informati	Perso on is used to contact you to	Page #2 onal Information of F schedule an appointr		le good contact numb
Worker's Date of Birth:				
Home address:				
Home Phone:	Cell Phone:		Work Phone:	
Other Contact Phone:	Supervi	sor's phone:	(No J	DSN #s)
Worker's AKO address:				
Civilian Pay Plan:	Pay Grade:	Occ. Code:	UIC:	
Duty Title Description:				
Civilian Work Address:				
Supervisor's Name:				-
Supervisor's AKO address	:			
Military Rank:	_ Military Pay Grade:	AOC/MOS:	UIC:	
Military Work Address:				
Military Work Phone:			(No	DSN #s)
Preferred Exam Location (	Circle One):			
Phoenix		Tucson POC:		Flagstaff
JAYSON J. LUTES MAJ, AN, AZ ARNG JFHQ-STATE OCCUPATIONAL HEAL	TH NURSE			

602-629-4245

Version 1.1